

SUMMONS

In the Marion Superior Court, Room No. _____

Plaintiff

-vs-

Cause
No. _____

Defendant

TO DEFENDANT: (Name) _____

(Address) _____

You are hereby notified that you have been sued by the person named as plaintiff and in the Court indicated above.

The nature of the suit against you is stated in the complaint which is attached to this Summons. It also states the relief sought or the demand made against you be the plaintiff.

An answer or other appropriate response in writing to the complaint must be filed either by you or your attorney within twenty (20) days, commencing the day after you receive this Summons, (or twenty-three (23) days if this Summons was received by mail), or a judgment by default may be rendered against you for the relief demanded by plaintiff.

If you have a claim for relief against the plaintiff arising from the same transaction or occurrence, you must assert it in your written answer.

If you need the name of an attorney, you may contact the Indianapolis Bar Association Lawyer Referral Service (269-2222), or the Marion County Bar Association Lawyer Referral Service (634-3950).

Dated _____ (Seal)
Clerk, Marion Superior Court

(The following manner of service of summons is hereby designated.)

Registered or certified mail.

Service at place of employment, to-wit: _____

Service on individual (Personal or copy) at above address.

Service on agent. (Specify) _____

Other service. (Specify) _____

Attorney for Plaintiff

Address

Telephone

Marion County Superior Court
200 East Washington Street
Indianapolis, IN 46204

Telephone

SHERIFF'S RETURN ON SERVICE OF SUMMONS

I hereby certify that I have served this summons on the _____ day of _____, 20____

(1) By delivering a copy of the Summons and a copy of the complaint to the defendant. _____

(2) By leaving a copy of the Summons and a copy of the complaint at _____

which is the dwelling place or usual place of abode of _____

and by mailing a copy of said summons to said defendant at the above address.

(3) Other Service or Remarks: _____

Sheriff's Costs

Sheriff

By: _____

Deputy

CLERK'S CERTIFICATE OF MAILING

I hereby certify that on the _____ day of _____, 20____, I mailed a copy of this Summons and a copy of the complaint to the defendant, _____, by _____ mail, requesting a return receipt, at the address furnished by the plaintiff.

Clerk, Marion Superior Court

Dated: _____, 20____

By: _____

Deputy

RETURN ON SERVICE OF SUMMONS BY MAIL

I hereby certify that the attached return receipt was received by me showing that the Summons and a copy of the complaint mailed to defendant _____ was accepted by the defendant on the _____ day of _____, 20____.

I hereby certify that the attached return receipt was received by me showing that the Summons and a copy of the complaint was returned not accepted on the _____ day of _____, 20____.

I hereby certify that the attached return receipt was received by me showing that the Summons and a copy of the complaint mailed to defendant _____ was accepted by _____ on behalf of said defendant on the _____ day of _____, 20____.

Clerk, Marion Superior Court

By: _____

Deputy

Cause No. _____ Room No. _____

Plaintiff

vs.

Defendant

SUMMONS

SUPERIOR COURT ROOM NO.

SHERIFF'S COSTS

Attorney for Plaintiff

Address

Telephone